

**Grant requests may be made between:  
September 1 and April 15 of each calendar year.  
Please allow six weeks for processing.**

Name of organization \_\_\_\_\_ Date \_\_\_\_\_

Address \_\_\_\_\_  
City/State \_\_\_\_\_ Zip Code \_\_\_\_\_

Contact Person \_\_\_\_\_ Phone \_\_\_\_\_

E-mail \_\_\_\_\_ Amount Requested \_\_\_\_\_

**~There is a \$2,000 maximum request limit.**

**~If your request is permitted, we will ask for a follow-up letter.**

**~We will be making a site visit to observe progress of project.**

**~We will ask that you provide information and pictures  
for a display at our banquet next spring.**

**~Incomplete requests will be denied.**

Please type the answers to these questions on a separate sheet of paper and attach to this cover sheet. Please answer all questions to the best of your ability.

1. What is the purpose of the proposed project?
2. What is the long-term positive impact of the project on the communities of Union County?
3. Why is this particular project needed?
4. What is the approximate number and age groups impacted by this project?
5. How will the funds be used?
6. Provide an itemized breakdown/budget.
7. What is your timeline for this project?
8. List all other potential or committed funding sources.
9. How does this project help to support the YACC mission?

**“To lend assistance to individuals and groups within our communities in order to increase the quality of life for all.”**

For Office Use Only:  
Granted \_\_\_\_\_  
Amount\$ \_\_\_\_\_  
Adopted By \_\_\_\_\_  
Forwarded to SCICF \_\_\_\_\_  
Date Received \_\_\_\_\_

Please submit your completed application to:  
YACC: Grant Request  
PO Box 244  
Creston, IA, 50801

Applicant's Signature \_\_\_\_\_